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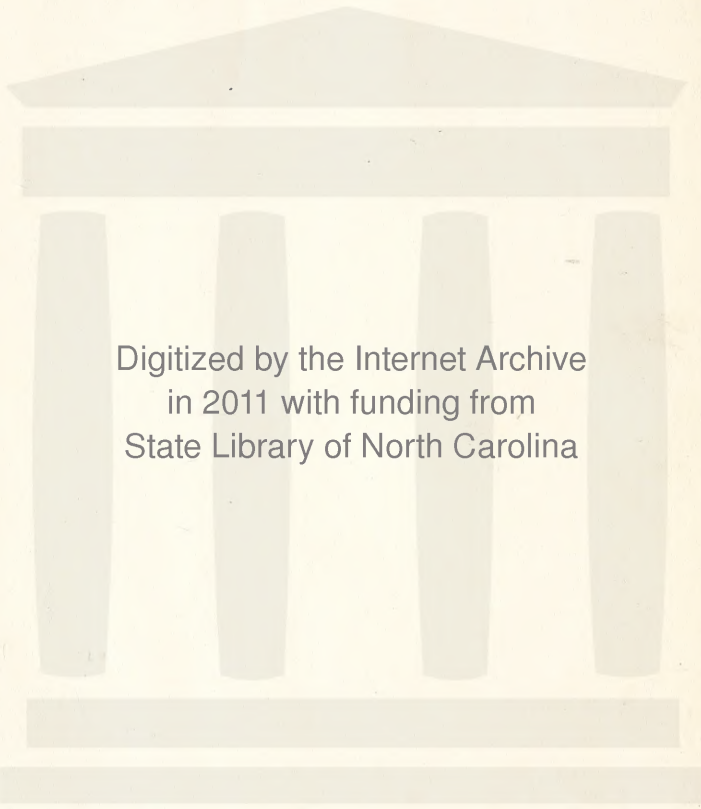


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RALEIGH

TO THE PEOPLE OF NORTH CAROLINA IN
BEHALF OF THE INSANE THAT ARE NOW
WITHOUT HOSPITAL CARE IN THIS STATE

BY THE
BOARD OF PUBLIC CHARITIES
OF NORTH CAROLINA

RALEIGH
EDWARDS & BROUGHTON, AND E. M. UZZELL, STATE PRINTERS
Presses of Edwards & Broughton
1900

To the People of North Carolina.

The Board of Public Charities of North Carolina, under a sense of the advisory responsibility imposed by the Constitution and statutes thereunder, desires to lay before the people the necessity of measures for the care of the insane, in addition to the provision now made by the State Hospitals at Raleigh, Morganton and Goldsboro.

The facts to which public attention is requested have been definitely ascertained and considered carefully; the conclusions therefrom, and action urged, are believed to be needful to the welfare of the State, in the highest degree.

The protection and comfort of the weak in any form, by the strong; the relief of the blind, deaf-mute, insane, feeble-minded, chronic invalid and helpless orphan is the chief glory and honor of all God-fearing people upon this earth.

This burden, for burden it needs must be, is shared by every country, and grows with the advance of population. From various circumstances, so far as the insane are concerned, it is less in this State, if statistics are correct, than in any equal population of which we have knowledge, and yet it is far in excess of any remedial or even custodial care yet provided. We must gird ourselves to the same thorough fulfillment of the first duty of humanity which is performed in the centres of civilization, or retrograde into an indifferentism little better than savagery.

The *Journal of Insanity* has affirmed that insanity is increasing beyond the rate of population. The publica-

tions of many countries seem to confirm that view. Be that as it may, it will be shown herein that our State is confronted with a steady annual increase. And if there has been, at any period in recent years, positive diminution, through the effect of institutional care upon acute cases, we must now recognize that two of these are approaching an extraordinary congestion of chronic cases, while the third, though temporarily relieved by enlarging, must experience the same.

Of all misfortunes that befall the private citizen, nothing is such a hopeless task as the relief of insanity, or attempt thereto, in the private home. Hospital care is absolutely required, and every interest of the State, pecuniary, social and humanitarian, is concerned in the restoration of the tax-consumer to his former relation as a tax producer and productive worker in society.

Yet it was in the latter part of the eighteenth century before hospitals worthy of the name were organized for the unhappy ones bereft of reason, and the nineteenth was far advanced before most of the States assumed this now evident duty.

In 1849 the institution at Raleigh was authorized, but seven years elapsed before it was opened, in February, 1856. It was built originally for 224 patients, and never met the demands upon it. By modifications, which increased its number to 250, in 1870, its wards were congested with chronic cases, although many risks were taken to send away the supposed harmless and incurable. In 1872 appeals for enlargement were made, and, after repeated efforts, the General Assembly responded to the public demand, and finally new institutions were organized at Morganton and Goldsboro.

The extensive plan adopted at Morganton, despite opposition, proved so needful that the buildings could hardly be constructed rapidly enough to meet the de-

mand for room. Under the fortunate administrative management of its Superintendent from the beginning until the present time, and progressive directors in its boards, the original work was expanded, and although not a dollar of special appropriation was granted, for twenty years, the Hospital, as it came to be called, more properly, was growing all the while and accepting a large proportion of the acute cases as they occurred.

The records are full of the ever-recurring necessity, and the efforts to meet it. The struggle to respond to the appeals of sufferers has resulted in economies of every kind in our institutions. At Morganton, for instance, nothing short of personal examination can reveal the perfect adaptation of means to the ends sought which prevails, and which, step by step, has afforded the opportunity to increase the number of available beds and decrease the cost per capita, until it has reached the present extremely low rate, which is perhaps open to objection as being below what it ought properly to be.

The Superintendent's reports for years past tell the same story of demand for relief. In the early biennial report of 1882-84 Dr. Murphy says: "These are sufficient reasons to urge the great necessity for a speedy finishing of the northern wing. But, in addition to the reasons named, many insane persons are at home, and in jails and poor-houses, who, besides the sufferings they undergo from ignorance and brutality, are a source of annoyance to their friends and of danger to themselves and the community."

In 1884-86 he states: "The policy governing the Executive Committee in receiving patients has been to take all recent or supposed curable cases and those whom it would be dangerous to allow to go at large. There is not room enough in the two asylums for the white insane to accomodate all the white insane of the

State." In this, he urges the enlargement of the institution at Raleigh.

Following the history of effort lagging behind increasing need, by the report of 1892, we learn that at Morganton the capacity was 550 insane, Raleigh 300 and Goldsboro 300, making 1,150, and leaving 582 not provided for; of these many were, as usual, in jails and poor-houses. The following is added: "A chapter might be written on the reasons why this is not only inhuman, but positively expensive."

The jails and poor-houses in North Carolina are not, as a rule, fit for criminals and the poor who are sane, much less are they suitable for the insane, especially during cold weather.

In 1894 another and especially painful feature of this subject is touched upon: "Why so many more women than men demand room here is not clear, but it has been so from the beginning. It is plain, however, that these females whose minds are weakened by disease, or who are congenitally defective, must have custodial care, to protect them from vicious men." These considerations were urged by the friends of certain applicants. "How far the State is called on to protect society, and prevent the birth of illegitimate defectives, is for the Legislature to decide." "There is urgent demand for more room for the insane of this district."

In 1896 it became necessary to refuse admission to 54 women, almost all of whom needed the care of the Hospital. An effort was made to learn how many in the Western District needed Hospital care, and from 37 out of 52 counties it was found that 75 cases existed for whom application had not been made. At that time the Superintendent stated: "The names of not less than two hundred insane persons can be called, most of whom should have the benefit of hospital care and treatment. Of this number, about two-thirds are women."

Even after a cottage built for women, which accommodated 75, constructed from the savings of support, was finished in the spring of 1897, there yet remained the state of affairs referred to in the report last published (November 30, 1898), as follows:

"During the two years 57 men and 62 women applied for room, whose applications were rejected, in most cases, for want of room. I must ask you (the Board) again to appeal to the Legislature to provide more room for the insane of this district. * * * Because of the very scant and insufficient appropriation two years ago, there has been no improvement made except the purchase and installation of an ice making and refrigerating plant. Repairs have been kept up the best we could with the money we had. There are some repairs needed. The whole appropriation has been more than expended if all the yearly bills were paid."

Attention is especially called to the present condition of the Morganton Hospital, and its history for the past year. The unprinted quarterly report for March 1, 1899, shows present 332 males, 451 females; total, 783: "The department for women is full, and all cases of whatever nature are refused admission for this reason. The ward set apart for the acute and disturbed class of women has such a large number of the noisy chronic cases with the acute that the efficiency of this most important department is well-nigh ruined, and the patients who have a fair chance for recovery under favorable circumstances have their chances greatly impaired, if not destroyed, by the presence of the chronics.

"The result of this crowding does not stop with the positive inability to admit those whom we reasonably hope to restore, but even after their reception the opportunity for recovery is greatly lessened. Nor is that all, for the worst effect of overcrowding, the danger of loss

of life is vastly increased." The Superintendent quotes from a report of the Board of Health in 1898: "There is, unfortunately, an overcrowding in the Hospital which must appeal as well to you as to us. In some of the wards, where provision was made in the original plans for 21 patients, several more than twice that number are now accommodated. One floor, especially, crowded with demented contains, of necessity, a number of tuberculous patients, who are also, from their enfeebled state and poor physical condition, incapable of control or direction. The records from this portion show that deaths from consumption, or other forms of tuberculosis, are on the increase, and this shows an increase of the infectious germs of the disease. * * * We most earnestly ask that you will give this matter your attention and devise ways and means to relieve a situation that is curable by the increase of capacity of the institution, and needs your help as the appointed guardians of this stricken people."

The quarterly report to June 1 continues the same sad story. With 144 applications to date, it had only been practicable to admit 72: "The demand for room does not grow less, rather the reverse, and with it increased importunities from relatives and friends."

By September the number rejected had reached 108 during the nine months, and all for want of room. The Superintendent and Board of Directors then invited a conference with the Board of Public Charities to consider this subject, of such importance to the public welfare, and a meeting was held at the Hospital. It was deemed proper that the whole people should be informed in every available way, and especially through the Boards of Visitors of Charities in the several counties, of the need for enlarged accommodations for the unfortunate insane, so rapidly increasing in number.

Meanwhile an inquiry was made by the Board of Public Charities to ascertain, if possible, the number of insane, white and colored, in each county "Home," or jail, or in private care, through the Superintendents of Health of the respective counties, or failing their attention, through county officers and Boards of Visitors. The same inquiry was made in regard to epileptics, or idiots, who were public charges, by reason of their dangerous character or want of support at home.

This inquiry was extended throughout the State, because the urgency for relief was known to be also great in the Hospital at Goldsboro.

In that institution there are 310 patients drawn from the Eastern District and 135 from the Western, making a total of 445. There is no room left in an institution originally accommodating 90, and, with all additions thus far in construction, now crowded to overflowing. All the conditions referred to at Morganton are here intensified, with the addition of the well-known inability to resist phthisis in the negro, as compared with the white man. Insanity, once so rare among members of that race when all their care and responsibility was cast upon the white owner, runs riot among them now that they must meet the stress of competitive existence, with the scant sympathy for each other in weakness, sickness or old age characteristic of the race.

It has been said that the sick negro has no home except the refuge of the alms-house; much more so with the sick who are insane. Dr. Miller, the humane Superintendent of this institution, has earnestly pointed out the especially dependent condition of this class of unfortunates, and has asked for the sum of \$50,000, to be devoted to extension and one or two necessary improvements. The wisdom of providing ample accommodation here is manifest upon reflection. It is certain that

the insane negro, almost universally, is a public charge. A few, in a jail or a Home, are expensive to care for. But under the system at Goldsboro the per capita cost is very limited, being \$94.09½ per capita (including all usual repairs and cost of electric plant), and all patients capable of contributing to their own support in daily labor are utilized. County care often reaches this sum, without the treatment that returns many to the ranks of workers in the body politic; indeed, with no care worthy the name.

In reference to the Central Hospital, at Raleigh, it is a matter of thankfulness that the determined efforts of the Superintendent (Dr. Kirby) have resulted in the substantial additions to the institution of the past few years, which, fully completed, will provide for 440 patients, 412 having been the daily average in 1899. By the opening of the new wings, and the free exercise of the furlough system, the number of discharges has been large, as acute cases have been promptly received. But it is probable that the high-water mark of admissions has already been passed, the number for 1898 being 190, and for 1899 only 172, or about 10 per cent less; yet the daily average is the highest. It is to be expected that the proportion of the chronic cases will gradually increase. The especial need of this institution is more land, in view of the suggestion hereinafter made.

The Western Hospital District contained, in 1890, a population of 633,412 white persons, while the Eastern had 422,633; or about three-fifths to two-fifths. The Hospital at Raleigh has 390 from the Eastern and 8 from the Western District. That at Morganton has 720 from the Western District and 36 from the Eastern.

From tables submitted by Dr. Murphy, and on file in this office, it appears that the annual increase of the number of insane in the Western District is not less than

forty, probably more, on account of the inveterate tendency to conceal the beginning of this great misfortune. According to this, 66 should represent the number for the State in the white population, and probably one hundred for both. This seems a grievous burden to be borne by the State, but when the increase of population and especially of taxable wealth are considered, it is seen to be the natural incident accompanying the growth of any people. We must remember that the census of 1900 will show a large increase of population, especially in towns, and we know already that in the past year more than eighteen millions of taxable property was placed upon the lists, in addition to the former amount.

Be these facts whatever the enumeration may show, there is a plain duty before us, as a people, to provide for the most afflicted of all God's creatures who are among us and of us; to-day helpmates in the busy labors of society—to-morrow stricken down, broken in body and mind, suffering more than physical pangs, undergoing mental tortures beyond description, hanging over a gulf from which rescue must come at once, if it come at all.

The Superintendent at Morganton presents reasons for believing that 500 insane, at least, are now uncared for in that district, 300 of whom should be in the Hospital. That this must be true is fully borne out by the result of the patient inquiry continued for many weeks, and now on file in the office of the Board of Charities. There have been reported at this time:

In County Homes, white insane, 110.
colored insane, 56.
white epileptic, 64.
colored epileptic, 33.
white idiots, 93.
colored idiots, 61.

In county jails, white insane, 17.

colored insane, 9.

white epileptics, 10.

colored epileptics, 1.

white idiots, 2.

colored idiots, 4.

In private care, white insane, 148.

colored insane, 48.

white epileptics, 44.

colored epileptics, 8.

white idiots, 42.

colored idiots, 18.

Total mentally unsound—white, 527; colored, 239.

Grand total, 766.

But the number reported in private care is very greatly less than the actual truth. That is manifest upon comparing the number returned by careful physicians in the smaller counties with the careless returns, in some cases, from a few of the largest counties. It is to be regretted that public officials fail in such important duties connected with their obligations to the people. Several large counties report no insane under private charge, although the fact is known through other means that such cases are there resident. Letters are received, especially from the Western counties, asking what can be done to obtain admission to a curative hospital for the stricken.

Some idea of the widespread distress and intensity of suffering may be perceived upon the perusal of the applications to the Superintendent of the Hospital at Morganton received within two days prior to the meeting of the Board of Charities. The originals, with names and locations in full, are on file, and a few extracts are given:

"I am sorry to learn that you have failed to have any accommodation for He is not any better. We can not get him to do one thing. I don't know what we will do. He is an only dependence, and I would plead for your assistance as soon as possible, believing, as I do, that in a short time he would return sound and well."

From another:

"Mr. , of this county, has become unmanageable and dangerous to the community. You will please send me the necessary blanks, and any instruction you may think necessary for his committal at once, and oblige."

"My wife is insane, and has been in a worse condition than ever before for the last ten days. It is impossible for me to keep her at home, as I did three years ago. I can't get any rest, day nor night. No one will stay with her. I am up whole nights without a minute's rest. Please let me know if there is room for her."

"I have been thinking for some time I would write you in regard to my wife's condition; but feeling hurt and pained by not getting her into the Hospital, I thought it useless. But I do think it a shame that anyone who is worthy and needs treatment as she does can't get there for treatment; so I write this, asking and begging you if there is any chance to get her there at once. I have tried the very best local treatment by skilled doctors here, as well as at her former home. Poor woman! she seems to want to go and be restored in health and mind, and be to us as she once was. Hoping you will kindly and sincerely consider my condition, with two little boys, 9 and 4 years old, trying to work and get along with an insane wife."

"Dear Doctor:—As we have made two applications for the admission of into the Hospital, and as

both have been rejected, will you kindly tell me why he can not be admitted? If any man in this section of the State is worthy of the benefit of State institutions, it seems to me that Mr. is. He has been one of our best citizens, and has raised seven boys to be good citizens."

"Dear Doctor:—Would there be any chance to get in the Hospital? She will be compelled to be sent to jail. The family are very poor, and are not able to keep a person with her, and they have no place in which to keep her confined. Her husband has been prevented from labor on her account, until necessity compels him to work for a support. I am sorry to ask it, knowing how little room you have at your command, but hoping that this patient might be cured is why I ask."

"My daughter is badly insane. I have to keep her confined, and I am a widow and have not the means to take care of her as she should be cared for. I would be glad if you would take her in the Asylum if you possibly can. Please write and let me know at once."

What can a Superintendent do, who knows that to admit to crowded wards means more injury to patients already confided to his guardianship than benefit to the one received? What can Boards of Directors do, whose possible means of extension has been taken away by the reduction of appropriations below the limit of support, in the face of steady and constant demand by greater numbers?

They have asked the General Assembly to consider the pitiful cases of suffering, and to take measures for the increased accommodation urgently needed. They have exhibited their crowded wards to the State Board of Health, and have appealed to the Board of Public Charities to investigate and lay the facts before the tri-

bunal of last resort, the people, and their accredited representatives to the law-making body of the State.

In response thereto, and after the most thorough investigation, this Board affirms that there is great and immediate need for enlarged facilities for the cure, if possible, and the proper care, of a large number of insane of both races, and the danger is imminent of chronic and hopeless insanity in a great proportion of these if relief is not afforded.

Much has been said of the importance of early treatment before what may be functional disturbance results, by its abnormal action, in organic break-down. It is clearly stated by the eminent Dr. C. H. Hughes, of St. Louis, editor of the *Alienist and Neurologist*, and of great practical experience in nervous disorders, and the personal care of the insane:

"In every country to-day are hundreds who, by timely medical treatment, have recovered reason lost and minds threatened with perpetual derangement who bless these modern instrumentalities of their restoration. They come back to the world of material life, and testify as though risen from the dead; yet, in the world of sane people there are numbers now living who are destined to die hopelessly insane, because they will be kept by ignorance and unjust suspicion from that timely hospital or expert medical treatment in the incipency of their malady which might save them; for insanity in its earliest stages, in the first attack, is one of the recoverable maladies, while in its chronic stages it is one of the most hopeless, as it is one of the most pitiable, of afflictions. * * * The right to a rational chance for recovery at the hands of those who are well in mind is one of the rights which appertain to insanity, whether it be rational enough to demand its rights or not."

Consider that last expression—"The right to a rational

chance for recovery." How shall it be secured? Private care is out of the question; at the best that is a surrender to the inevitable, a drifting with the tide, to end in chronic invalidism. Then, if public relief is to be administered, shall it be through the county authorities, or by the State?

This Board will not say anything to the disparagement of the honest efforts now being made in many counties for the improvement of Homes for the poor, and jails. Thanks largely to the unselfish work of the Visitors of Charities, the standard of treatment is being gradually elevated, and some day it is hoped that both institutions will be far more effective agencies for the blessing of society than ever before.

But it is impossible for either the Home or the jail to substitute a properly equipped curative hospital for the acute insane. Nor is economy for the taxpayer subserved thereby. Numbers facilitate economy of administration, and it matters not whether cost is paid into county or State treasury. Nor have we any right, moral or legal, to say to any citizen: You shall pay your taxes to support the charitable institutions, but whether you or yours shall ever be admitted to their benefits, if you are unfortunate enough to suffer, depends upon whether you become insane at a convenient time.

Shall we say, in practice if not in language: We are growing in population and in wealth, but we can not provide for those who fall by the wayside; even if they are men who have served the State in honor, lived lives of usefulness to the community, perhaps taken up arms in our defence, or if they are beloved mothers, surrounded by little ones who need her nurturing care, and are suffering every hour of its deprivation. Must such as these depend upon the lottery of chance for admission and salvation from mental destruction?

We do not dwell upon the possibility of being sub-

jected to the lash of a brutal jailer, for unconscious offence, or of penning up and feeding like a wild beast at a so-called Home, instances of which, with names and localities, were laid before this Board. Humanity shudders at the reflection that such things exist at this hour in an enlightened State. But the people are entitled to know the whole. The darkest element is contained in the fact that of 208 single women in the Morganton institution, 27, or nearly 13 per cent, were debauched, and many of these had illegitimate children. Some of these were respectable before becoming victims. Besides the horror of the attendant circumstances, the burden of these wretched infants, inherited defectives, thrown upon society!

To whomsoever these pages shall come, we repeat the inevitable conclusion that is forced upon us: The man once insane must become a charge upon the rest of society, either directly to his friends or to the county or the State.

Remember that insanity is the only thing that the private citizen can not possibly provide for, with every means at hand, be he ever so wealthy. To secure the best advantages for recovery requires medical care in a hospital.

It resolves itself, then, into county charge or that of the State, we repeat. County care for a limited number means a greater expense, provided just treatment be accorded. For anything less than just treatment, we should be accountable before the bar of the civilized world, in the forum of enlightened conscience, at the judgment seat of Almighty God.

Finally, if the State takes up her duty, what should be done in the present condition of affairs?

This must be left to the wisdom of the General Assembly, but this Board respectfully calls attention to some facts in regard to the matter of relief:

The Legislature of 1899 provided for the Morganton Hospital the sum of \$90,000 annually for support, as did the Assembly of 1897, instead of the former sum of \$100,000, when the number of patients was considerably less than at present. It also appropriated \$10,000 each for 1899 and 1900 for additional room. But to provide for at least three hundred persons, fit subjects of hospital treatment, would require \$40,000 additional to complete and equip cottages in connection with the Hospital.

After that, about one thousand one hundred insane would be provided for in the Western District, for the sum of \$120,000 annually, being at a per capita cost of \$113, instead of one hundred and twenty to one hundred and twenty-five dollars, as at present. This, if realized for white insane, would be quite unparalleled for results with economy of means. But there is a proper limit in this direction.

Because the Boards and Superintendents of all our institutions have, by labor-saving appliances and modern methods, aided by low prices, reduced the per capita expense year after year, and devoted all possible saving to the extension of their usefulness, there are some who take this for granted indefinitely, and have met every economy with further propositions for restriction. It ought to be understood that there is a point beyond which a smaller per capita would be a discredit rather than an honor. It is little above ordinary almshouse charges now in some States, and prices are now rising. One may exist upon half a loaf instead of the whole, but the process of division has a stopping place.

If the question be asked, How can the State best use additional funds for accommodation? the following suggestion is made: We should not erect new institutions with the great proportionate cost of administration, or extend present edifices on too large a scale. We should

erect inexpensive cottages for colonies, so called, within a mile or two of one of the present institutions, as the case may be, if land be expensive. As excitable cases become mild and improved under treatment, they could be transferred to one of the cottages, under good attendants, and, perhaps, gradually earn their support on the farm, until their condition finally warrants a return home. They would, of course, be under medical oversight constantly, and could be transferred at once to the proper ward in the Hospital should need arise. The expensive portions of the whole Hospital system would require no duplication. The least possible expenditure would be available for the object desired.

The practical application lies in these figures: The cost of the Morganton Hospital was \$900 a bed; that at Raleigh about the same, and at Goldsboro \$500 a bed. The figures of Dr. Murphy are used. The average cost throughout the United States is \$1,200 a bed; while there are institutions that cost \$2,500. But the cottages erected on the colony plan at Morganton required but \$200 a bed, and the Superintendent states that if the brick be made by the management, 400 could be furnished with beds at a cost of two hundred to two hundred and fifty dollars each.

The crowning consideration is, that these patients would have treatment, and every hope of recovery; but where they are now, in jails or Homes, or taking their chances in the average private family, what is their hope for the future, and what must be the judgment of every citizen who has at heart the honor of his State and the welfare of the people?

Whatever may be the value of the suggestions herein offered, the Board of Public Charities earnestly urges that the great suffering now endured be relieved as early as possible, and this for the colored race also, whose situation of friendlessness generally, when ill, has been

adverted to. The steady improvement and great expansion upon small means at the Goldsboro Hospital is a guarantee of the wise and careful management of means for enlargement there.

The chief need at the Raleigh Hospital is the addition of such lands as may make a cottage system eventually practicable, should its Board and Superintendent advise its introduction.

To his Excellency, the Governor, and all executive and judicial officers of the State:

To all members of the County Boards of Visitors of Charities especially, to the honorable Senators and Representatives in the present General Assembly and their successors, to the Commissioners and officials of the counties:

To the Press of North Carolina, standing as one phalanx in the cause of humanity and for the relief of suffering; to the clergy of the various religious bodies; to the men of influence in political, financial and professional life; to the army of teachers in schools of whatever character:

To every good citizen within our borders, and every woman whose heart responds to the appeal of distress, we entrust the unfortunate insane, who are in need of the protecting guardianship of North Carolina.

To you we commend the facts that have been recited; from you, who form the great assize of public opinion, we invoke the decision that the humblest shall have the right to regain his lost reason, guaranteed by the will of the people.

CHARLES DUFFY, M. D.,

WESLEY N. JONES,

WILLIAM A. BLAIR,

S. W. REID,

Board of Public Charities of North Carolina.

C. B. DENSON.

Secretary.

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